

DO/EO BIBLIOGRAPHIC DATA ENTRY

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|------------------------------|--|---------------------------|--------------|
| SERIAL NUMBER: | 09 / 701883 | RECEIPT DATE: | 12 / 04 / 99 |
| IA NUMBER: | PCT/ DE98 / 01616 | IA FILING DATE: | 06 / 01 / 99 |
| FAMILY NAME: | PILLEKAMP | DELAY WAIVED (Y/N): | Y |
| GIVEN NAME: | KLAUS DIETER | DEMAND RECEIVED (Y/N): | Y |
| PRIORITY CLAIMED (Y/N): | Y | PRIORITY DATE: | 06 / 04 / 99 |
| NO BASIC FEE (Y/N): | N | US DESIGNATED ONLY (Y/N): | N |
| ATTORNEY DOCKET NUMBER: | P00,1883 | COUNTRY: | |
| CORRESPONDENCE NAME/ADDRESS: | CUSTOMER | NUMBER: | 000000 |
| | | TELEPHONE | 0000000000 |
| | | FAX | |
| NAME: | SCHIFF HARDIN & WAITE | | |
| | PATENT DEPARTMENT | | |
| STREET: | 6600 SEARS TOWER | | |
| | 203 SOUTH WACKER DRIVE | | |
| CITY: | CHICAGO | | |
| STATE/COUNTRY: | IL | ZIP: | 606066473 |
| EMAIL: | | | |
| APPLICATION TITLES: | | | |
| | METHOD FOR THE COMPRESSED CORDLESS COMMUNICATION BETWEEN A BASE STATIO | | |
| | N AND A PLURALITY OF MOBILE PARTS | | |

TAB TO LAST POSITION,PUSH SEND



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Bib Data Sheet

CONFIRMATION NO. 9174

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|------------------------------------|---|---------------------|-------------------------------|--|
| SERIAL NUMBER 09/701,883 | FILING DATE 12/04/2000 RULE | CLASS 370 | GROUP ART UNIT 2664 | ATTORNEY DOCKET NO. P00.1883 |
|------------------------------------|---|---------------------|-------------------------------|--|

APPLICANTS

Klaus-Dieter Pillekamp, Erkrath, GERMANY;

** CONTINUING DATA *****

THIS APPLICATION IS A 371 OF PCT/DE99/01616 06/01/1999 *Yes*
C.S.S

** FOREIGN APPLICATIONS *****

GERMANY 198 25 076.2 06/04/1998 *Yes*
C.S.S

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 01/31/2001

| | | | | |
|--|--------------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY GERMANY | SHEETS DRAWING 4 | TOTAL CLAIMS 17 | INDEPENDENT CLAIMS 3 |
| 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged <i>C.S.S</i> Examiner's Signature Initials | | | | |

ADDRESS

BELL, BOYD & LLOYD, LLC
P.O. BOX 1135
CHICAGO, IL 60690-1135

TITLE

Method for compressed wireless communication between a base station and a plurality of mobile parts

| | | |
|-----------------------------------|---|--|
| FILING FEE RECEIVED 860 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees |
| | | <input type="checkbox"/> 1.16 Fees (Filing) |
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